

Valley, married \$65—single \$40; (c) Labrador City, married \$35—single \$20; (d) Wabush, married \$35—single \$20.

2. As a result of recent collective agreements negotiated between the Treasury Board and various bargaining agents representing employees in the public service, the matter of payments under the isolated posts regulations has been referred to the national joint council of the Public Service of Canada for review and recommendations.

UNEMPLOYMENT INSURANCE PAYMENTS,  
QUEBEC AND ONTARIO

Question No. 348—**Mr. Matte:**

1. During the fiscal year ended March 31, 1967, what was the monthly average number of persons for which reimbursement claims were made under the Unemployment Assistance Act (a) in Quebec (b) in Ontario?

2. During the same year, what was the federal government's share of such payments (a) in Quebec (b) in Ontario, and if the contributions made in Ontario are higher than those made in Quebec, what are the reasons therefor?

[Translation]

**Hon. John C. Munro (Minister of National Health and Welfare):** 1. (a) Quebec, 317,612; \*(b) Ontario, 144,870.

\*The statistics were reduced in the latter part of the year by the transfer of a portion of the general assistance program to the Canada Assistance Plan.

2. \*(a) Quebec, \$59,786,898; (b) Ontario, \$42,923,298.

\*This figure consists of \$33,286,898 paid under the authority of the Unemployment Assistance Act and \$26,500,000 under the Established Programs (Interim Arrangements) Act.

[English]

INCREASE IN AIRCRAFT ACCIDENTS

Question No. 349—**Mr. Nesbitt:**

What is the explanation of the Department of Transport for the very sharp increase in the number of accidents to Canadian registered aircraft from January 1, 1965 until the present time?

**Hon. Paul Hellyer (Minister of Transport):** The number of aircraft accidents which have occurred since January 1, 1965, have actually declined in relation to the volume of flying as indicated by the following figures.

Between January 1, 1965, and December 31, 1967, accidents to Canadian registered aircraft increased by 35.6 per cent. During the same period flying hours increased by 46.2

Questions

per cent. Figures for 1968 are not yet available.

\*POSTAL CANCELLATION STAMP RESPECTING  
SMOKING

Question No. 355—**Mr. Knowles (Norfolk-Haldimand):**

1. Did the Postmaster General authorize the use of a cancellation mark for postage stamps bearing the slogan "The safe cigarette is the one you don't light" and, if so, when was this authorized?

2. Has the minister considered the effect of the use of such a slogan on all aspects of the tobacco industry; and, if so, will the Postmaster General have such cancellation marks immediately withdrawn from use?

**Hon. Eric Kierans (Postmaster General):**

Mr. Speaker, the answer to this question comes in two parts.

The first answer is Yes, in February, 1968. The answer to the second part is, after due consideration I do not plan to withdraw the use of the die at this time.

CAMPAIGN AGAINST CIGARETTE SMOKING

Question No. 363—**Mr. Rynard:**

1. What is the total amount spent by the Department of National Health and Welfare on the campaign against cigarette smoking?

2. What was the per capita consumption of cigarettes (a) across Canada for each of the years 1964 and 1967 (b) per province for the year 1964?

**Hon. John C. Munro (Minister of National Health and Welfare):** 1. \$582,777.36.

2. (a) 1964, 2,113; 1967, 2,293. (b) Not available.

PER CAPITA MEDICAL COST

Question No. 364—**Mr. Rynard:**

What is the average medical cost per capita (a) across Canada for the month of January 1968 (b) per province annually?

**Hon. John C. Munro (Minister of National Health and Welfare):** (a) The average per capita cost of physicians' services in Canada in 1966, the latest year for which data are available, was \$33.45, or \$2.79 per month. On the basis of preliminary observations it is estimated that the corresponding figure for January 1968 was \$3.26.

The per capita costs include payments made to physicians engaged primarily in private fee practice, payments made to salaried physicians, and payments made to residents and senior interns in hospitals.